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**SENATE BILL NO. 790**

Offered January 23, 2026

A *BILL to amend the Code of Virginia by adding a section numbered 38.2-3418.23, relating to health insurance; mandated benefits; treatment of menopause and perimenopause.*

Patron—McDougle

Referred to Committee on Commerce and Labor

**Be it enacted by the General Assembly of Virginia:**

**1. That the Code of Virginia is amended by adding a section numbered 38.2-3418.23 as follows:**

**§ 38.2-3418.23. Coverage for treatment of menopause and perimenopause.**

A. *As used in this section:*

*"Menopause" means the permanent cessation of menstruation due to loss of ovarian follicular function during which the body produces less estrogen and progesterone.*

*"Perimenopause" means the transitional period between full reproductive functioning and menopause during which menstruation may become irregular.*

B. *Notwithstanding the provisions of § 38.2-3419 or subdivision A 1 of § 38.2-6506, each insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis; each corporation providing individual or group accident and sickness subscription contracts; and each health maintenance organization providing a health care plan for health care services shall provide coverage for medically necessary treatment and care for menopause and perimenopause. Such coverage shall include treatment of symptoms, including irregular menstrual periods, hot flashes, vaginal or bladder problems, loss of bone, increases in low-density lipoprotein cholesterol levels, and sleep disruptions.*

C. *No insurer, corporation, or organization providing coverage pursuant to this section shall require a prior authorization or otherwise require a step-therapy policy or protocol for the administration or prescription of any medication administered or prescribed for hormone replacement therapy used to treat symptoms of menopause and perimenopause.*

D. *No provision of this section shall apply to short-term travel, accident-only, or limited or specified disease policies or contracts, nor to policies or contracts designed for issuance to persons eligible for coverage under Title XVIII of the Social Security Act, known as Medicare, or any other similar coverage under federal governmental plans.*

E. *The requirements of this section shall apply to any insurance policy, contract, or plan delivered, issued for delivery, reissued, or extended in the Commonwealth on and after January 1, 2026, or at any time thereafter when any term of such policy, contract, or plan is changed or any premium adjustment is made.*

INTRODUCED

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